



## HEALTH DEPARTMENT

9 School St. - Amesbury, MA 01913  
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[www.amesburyma.gov](http://www.amesburyma.gov)

John W. Morris, Health Director

Donna Lickteig, Adm. Asst.

### PERMIT APPLICATION FOR RECREATIONAL CAMP FOR CHILDREN

Fee Due: \$100.00

**Name of Camp** \_\_\_\_\_ **Site Address** \_\_\_\_\_ **Tel:** \_\_\_\_\_

Type of Camp \_\_\_\_ day \_\_\_\_ overnight \_\_\_\_ other, list \_\_\_\_\_

Opening Date \_\_\_\_\_ Closing Date: \_\_\_\_\_ Hours of Operation \_\_\_\_\_

Are meals provided? \_\_\_\_yes \_\_\_\_no Swimming pool? \_\_\_\_yes \_\_\_\_no Beach? \_\_\_\_yes \_\_\_\_no

★ Name of **Camp Owner** \_\_\_\_\_ Office Address \_\_\_\_\_  
Tel. \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

★ Name of **Camp Operator** (if different) \_\_\_\_\_ Address: \_\_\_\_\_  
Tel. \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

★ Name of **Health Care Consultant** \_\_\_\_\_ Address: \_\_\_\_\_  
Tel. \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

★ Name of **Health Supervisor** \_\_\_\_\_  
Type Medical License, Registration or Training (See 105 CMR 430.159(C)):  
\_\_\_\_\_

★ Name of **Aquatics Director** \_\_\_\_\_  
Lifeguard Certificate issued by \_\_\_\_\_ Expiration Date \_\_\_\_\_  
American Red Cross CPR Certificate # \_\_\_\_\_ Expiration Date \_\_\_\_\_  
American First Aid Certificate # \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Previous aquatics supervisory experience \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

★ Name of **Firearms Instructor** \_\_\_\_\_  
National Rifle Association Instructor's card (or equivalent) date certified: \_\_\_\_\_ Expiration Date \_\_\_\_\_

★ Name of **Horseback Riding Instructor** \_\_\_\_\_  
License Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ Stable Location \_\_\_\_\_  
Licensed in accordance with MGL Ch. 111 § 155, 158? \_\_\_\_yes \_\_\_\_no



The following is a list of documents that must be completed and submitted before your application for a permit can be fully processed. You are strongly encouraged to complete these documents as soon as possible and submit them in advance as this will expedite the permitting process. Please refer to the Mass. Regulations for Minimum Standards for Recreational Camps for Children, State Sanitary Code, Chapter IV-105 CMR 430.000, and the guidance documents issued by the Department of Public Health, Division of Community Sanitation for additional assistance with developing the following documents:

1. **Staff information forms**
2. **Procedures for the background review of staff (105 CMR 430.090)**
3. **Copy of Promotional literature (105 CMR 430.190(C))**
4. **Procedures for reporting suspected child abuse or neglect (105 CMR 430.093)**
5. **Health Care Policy (105 CMR 4-30.159(B))**
6. **Discipline Policy (105 CMR 430.191)**
7. **Fire Evacuation Plan approved by local fire department (105 CMR 430.210(A))**
8. **Disaster Plan (105 CMR 430.210(B))**
9. **Lost Camper Plan (105 CMR 430.210(C))**
10. **Lost Swimmer Plan (105 CMR 430.210(C))**
11. **Traffic Control Plan (105CMR 430.210(D))**
12. **Day Camps-contingency plan (105 CMR 430.210(D))**
13. **Primitive, Trip or Travel Camps- Written itinerary including sources of emergency care and contingency plans (105 CMR 430.212)**
14. **Current certificate of occupancy from local building inspector (105 CMR 430.451)**
15. **Written statement of compliance from the local fire department (105 CMR 430.215)**

Attach the names, ages, applicable current certification (if any), CORI/SORI, First Aid, etc., and the anticipated role at the camp of all supervisory staff. Use as many pages as necessary to complete this. Supervisory Staff means those persons with the responsibility, authority, and training to provide direct supervisions to camper groups. This may include counselors, junior counselors, general activity leaders, or other staff who provide supervision to campers without assistance.

Signature of Applicant: \_\_\_\_\_ Official Title: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use Only – Received**



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**ADM. ASST. HOURS:**

**Mon. thru Wed.: 8:00 am – 4:00 pm**  
**Thursday: 8:00 am – 7:00 pm**  
**Friday: 8:00 am – 12 Noon**

**DIRECTOR IN-OFFICE HOURS:**

**Mon. & Wed.: 8:00 am – 10:30 am**  
**Thursday: 4:00 pm – 7:00 pm**  
**Friday: 8:00 am – 10:30 am**

**OTHER HOURS BY APPT.**

**CLOSED DAILY FROM 12:00 pm – 1:00 pm**